

Chapter 3 – Operations Setup

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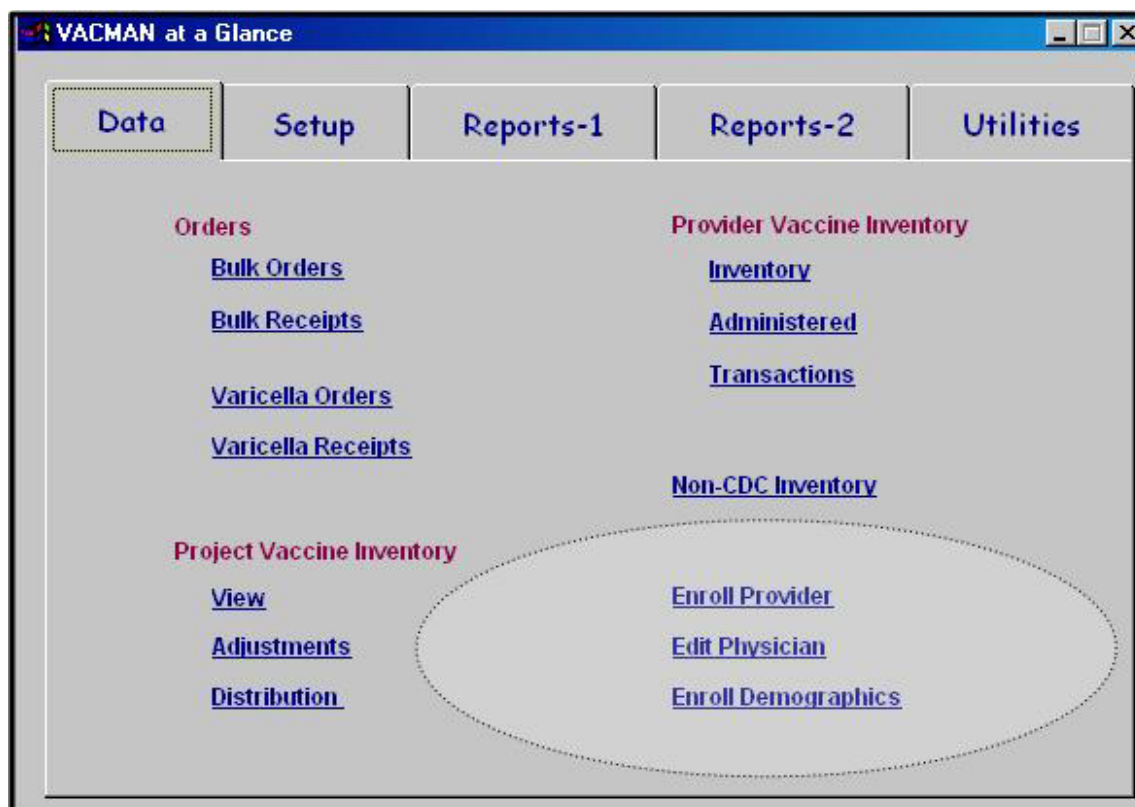
Operations Setup

Operations setup is the most frequently used type of setup your project will perform. It includes setting up and managing information about your Providers, Physicians, and Enrollment Demographics. You can access the Providers, Physicians, and Enrollment Demographics windows on the Data tab in VACMAN at a Glance.

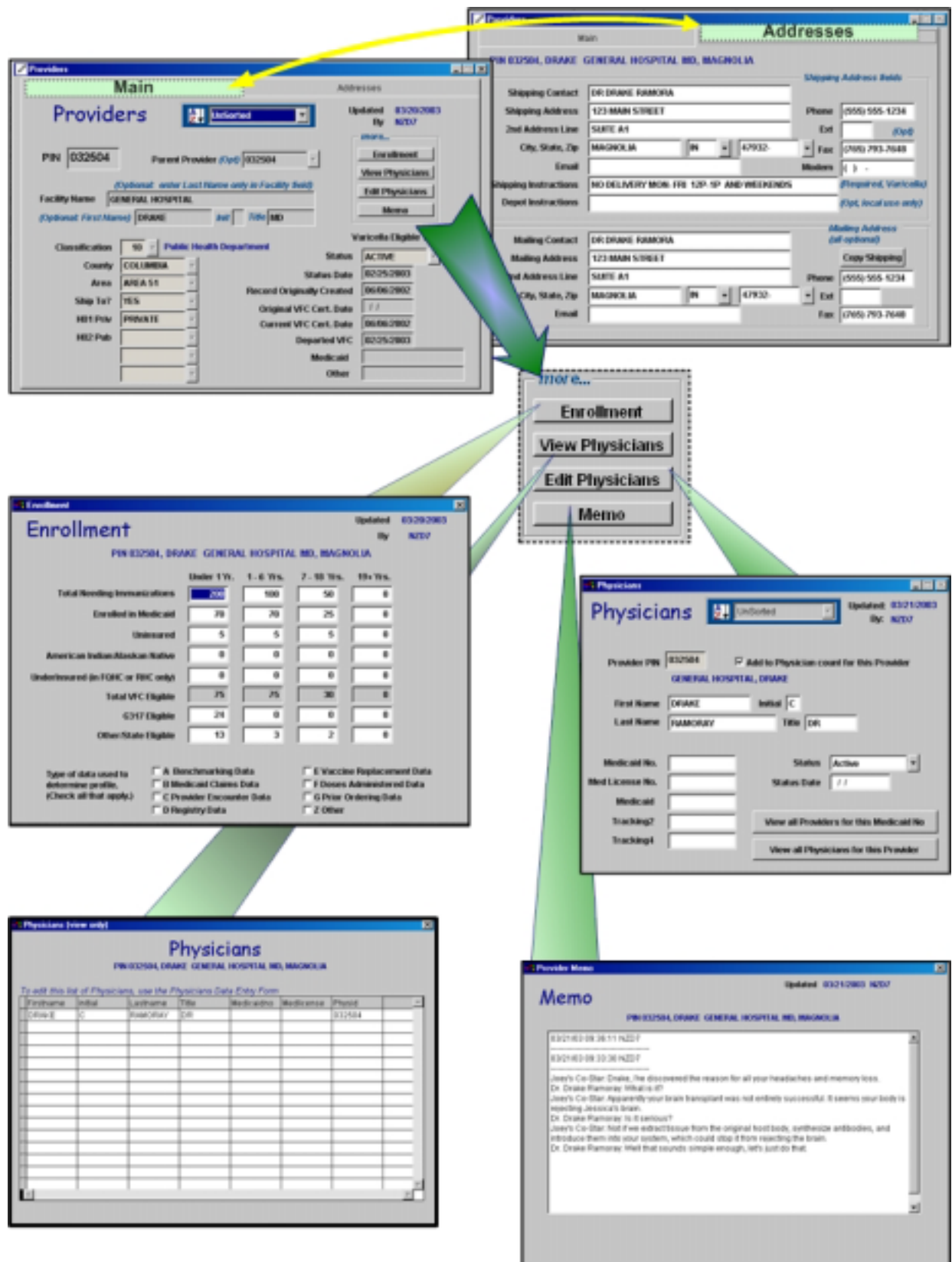
The three menu items highlighted below are covered in this chapter:

- Enroll Provider
- Edit Physician
- Enroll Demographics

Data Tab Locations



Enroll Providers Quick Reference Guide



Providers

The Providers window allows you to enroll and edit providers. Some of the information in this window is carried into other windows that require you to enter provider information. For example, you will use the Providers window to assign a provider a PIN number. These PIN Numbers then become selections for a provider drop-down box on other windows (such as on Varicella Orders).

Information you will need to enroll a provider includes (but is not limited to):

- Name
- Mailing and shipping addresses
- PIN
- Classification (Public – Health, Department, Hospitals, etc; Private)
- Status (Active, Not Active, Suspended, Temporary Leave)

Main Provider Window

The screenshot shows the 'Providers' window with the 'Main' tab selected. The window has a title bar with a pencil icon and the text 'Providers'. Below the title bar, there are two tabs: 'Main' and 'Addresses'. The 'Main' tab is active and displays the following fields and controls:

- Providers**: A large blue header text.
- UnSorted**: A dropdown menu with a small icon to its left.
- Updated**: 03/21/2003
- By**: NZD7
- more...**: A link to expand more options.
- Enrollment**: A button.
- View Physicians**: A button.
- Edit Physicians**: A button.
- Memo**: A button.
- PIN**: 032504
- Parent Provider (Opt)**: 032504
- Facility Name**: GENERAL HOSPITAL
- (Optional: enter Last Name only in Facility field)**: A note above the Facility Name field.
- (Optional: First Name)**: DRAKE
- Init**:
- Title**: MD
- Classification**: 10
- Public Health Department**: A link to expand more options.
- County**: COLUMBIA
- Area**: AREA 51
- Ship To?**: YES
- H01 Priv**: PRIVATE
- H02 Pub**:
- Status**: ACTIVE
- Status Date**: 02/25/2003
- Record Originally Created**: 06/06/2002
- Original VFC Cert. Date**: / /
- Current VFC Cert. Date**: 06/06/2002
- Departed VFC**: 02/25/2003
- Varicella Eligible ?**: ☒
- Medicaid**:
- Other**:

Provider Address Window

The screenshot shows a software window titled "Providers" with a tabbed interface. The "Addresses" tab is active, displaying the title "PIN 032504, DRAKE GENERAL HOSPITAL MD, MAGNOLIA". The window is divided into two main sections: "Shipping Address fields" and "Mailing Address (all optional)".

Shipping Address fields:

- Shipping Contact: DR DRAKE RAMORA
- Shipping Address: 123 MAIN STREET
- 2nd Address Line: SUITE A1
- City, State, Zip: MAGNOLIA IN 47932-
- Email: (empty)
- Phone: (555) 555-1234
- Ext: (empty) (Opt)
- Fax: (765) 793-7648
- Modem: () -
- Shipping Instructions: NO DELIVERY MON- FRI 12P-1P AND WEEKENDS (Required, Varicella)
- Depot Instructions: (empty) (Opt, local use only)

Mailing Address (all optional):

- Mailing Contact: DR DRAKE RAMORA
- Mailing Address: 123 MAIN STREET
- 2nd Address Line: SUITE A1
- City, State, Zip: MAGNOLIA IN 47932-
- Email: (empty)
- Phone: (555) 555-1234
- Ext: (empty)
- Fax: (765) 793-7648

A "Copy Shipping" button is located between the two address sections.

Fields

Field Name	Type	Length	Description
PIN	Character	6	Provider identification number.
Parent Provider (optional)	Character	6	Provider identification number for a "parent" provider record of the "satellite" provider being displayed. This is to link the records for enrollment data.
Facility Name	Character	35	Last name of a private provider OR the entire name of a facility.
First Name	Character	15	For private providers only. Private provider's first name. Use the LAST NAME field for a facility name.
Initial	Character	1	For private providers only. Middle initial of the private provider's name. Use the LAST NAME field for a facility name.
Title	Character	9	For private providers only. Suffix or title of the private provider.
Classification	Drop Down List Selection box	2	Sector code. Indicates the type of provider. Codes are: 10 - Public Health Department 11 - Public Health Department, as agent of FQHC or RHC 12 - Public Hospital 13 - Public Hospital as agent of FQHC or RHC 15 - Federal qualified Health Center/Rural Health Clinic

Field Name	Type	Length	Description
			16 - Other Public Health agency 17 - Other Public Health as agent of FQHC or RHC 20 - Private Practice (individual or group) 21 - Private Practice as agent of FQHC or RHC 22 - Private Hospital 23 - Private Hospital as agent of FQHC or RHC 24 - Private Other 25 - Private Other as agent of FQHC or RHC 30 - Immunization Project 31 – Project Depot 32 - Other Immunization Project 33 - Private Pay Depot
County	Character		The county this provider is located in.
Area or Subdivision	Character	15	User-defined name of the project jurisdictional subdivision (district, county, region, station, area, etc.) under which the provider is grouped. This field is assigned using the User-Defined Names screen under Setup/Other Main Menu.
Category 1, 2, 3	Character	10	Optional user-defined field. This field is assigned using the User-Defined Names screen under Setup/Other Main Menu. This field can be used for project information not served by other fields in the provider database.
Varicella Eligible	Check Box	1	Check box to indicate if this provider is Varicella eligible.
Status	Drop Down List Selection box	1	Select one of the following codes from the drop down list: Active, Not Active, Suspended, Temporary Leave.
Status Date	Date	8	Date that provider's active status last changed.
Record Originally Created	Date	8	Date the PROVIDER record was created.
Original VFC Certification Date	Date	8	Date the provider originally became eligible to participate in the VFC program.
Current VFC Certification Date	Date	8	Date this provider last updated their demographics information.
Departed VFC	Date	8	Date this provider became inactive.
Medicaid	Character	8	The Medicaid number of this provider.
Other	Character	8	Optional field. Enter any other information about this provider here.
Addresses			
Shipping Contact	Character	30	Person to contact for information or questions about vaccine shipments or deliveries.
Shipping Address	Character	35	Provider shipping address for delivery purposes. This should be the street address. DO NOT include a P.O. box in this address.

Field Name	Type	Length	Description
2 nd Address Line	Character	35	Second line for provider shipping address. Leave this line blank if not needed to complete the address.
City	Character	20	Shipping address city.
State	Character	2	Shipping address state.
Zipcode	Character	10	Shipping address ZIP code (5 or 9 digits). The 5-digit code must be in the ZIP field in ZIPCODES.DBF.
Email	Character	40	Email address to contact the provider.
Shipping Instructions	Character	50	Required for Varicella orders. Special information about the provider that is to be included on the shipping label.
Depot Instructions	Character	50	Optional field. Warehouse notes for packaging.
Phone	Character	14	Phone number for the person shown in the CONTACT field. Field includes parentheses around area code and hyphen after local exchange, for example (404) 555-8245.
Extension	Character	4	Optional field. Extension number for the telephone number shown in the PHONE field.
Fax	Character	14	Optional field. FAX number. Field includes parentheses around area code and hyphen after local exchange, for example (404) 555-8245.
Modem	Character	14	Optional field. Modem number.
Mailing address – All optional			
Mailing Contact	Character	30	Optional field. Person to contact for questions or problems about vaccine issues.
Mailing Address	Character	35	Optional field. Provider mailing address.
2 nd Address Line	Character	35	Optional field. Second line for provider mailing address. If a P.O. box is part of the mailing address, enter this on the second address line, otherwise leave this line blank.
City	Character	20	Optional field. Mailing address city.
State	Character	2	Optional field. Mailing address state.
Zipcode	Character	10	Optional field. Mailing address ZIP code (5 or 9 digits).
Email	Character	40	E-mail address to contact the provider.
Copy Shipping	Button		Select this button to copy the shipping information from the preceding portion of this window.
Phone	Character	14	Phone number for the person shown in the CONTACT field. Field includes parentheses around area code and hyphen after local exchange, for example (404) 555-8245.
Extension	Character	4	Optional field. Extension number for the telephone number shown in the PHONE field.
Fax	Character	14	Optional field. FAX number. Field includes parentheses around area code and hyphen after local exchange, for example (404) 555-8245.

Buttons

Note: You must save the record before you can access the following buttons.

Button	Function
Demographics	Opens the <i>Enroll Demographics</i> window, which is used to calculate the number of eligible candidates for vaccines according to the candidates' age groups and VFC eligibility.
View Physicians	Opens the <i>All physicians for PIN</i> window, which displays all of the physicians that are associated with the Provider PIN that is entered on the <i>Physicians</i> window.
Edit Physicians	Opens the <i>Physicians</i> window, allowing you to search, edit or add physicians.
Memo	Opens the Memo window, allowing you to view or add memos for internal use.

Edit Physicians

After you have enrolled a provider, the *Physicians* window is used to enroll and edit physicians. Some of the information you will enter when enrolling or editing a physician includes:

- The physician's Provider PIN number
- Physician's name, status, and Medicaid information

Physicians Window

[illegible]

Fields

Field Name	Type	Length	Description
Provider PIN	Character	6	Provider identification number. This number must be an existing Provider PIN number.
Add to Physician count for this provider	Numeric	1	Select this check box to add this physician to the count for the Provider PIN entered.
First Name	Character	15	Physician's first name.
Initial	Character	1	Physician's middle initial.
Last Name	Character	20	Physician's last name.
Title	Character	9	Physician's title (such as MD).
Medicaid Number	Character	12	Physician's Medicaid number.
Medical License Number	Character	12	Physician's medical license number.
Physician ID	Character	12	Optional user-defined ID field. This field is assigned using the User-Defined Names screen under Setup/Other Main Menu. This field can be used for an additional project-defined ID of the physician.
Other 1, Other 2	Character	12	Optional user-defined field(s). These fields are assigned using the User-Defined Names screen under Setup/Other Main Menu. These fields can be used for information about the physician not served by other fields.
Status	Drop Down List Box		Y – Active N – No longer in program S – Suspended T – Temporary Leave
Status Date	Date	8	Date that provider's active status last changed.

Buttons

Button	Description
View all Providers for this Medicaid No.	Opens the Providers with the same physician (Medicaid Number) window, which displays every provider that is associated with the Medicaid number that is entered on the Physicians window.
View all Physicians for this Provider	Opens the All physicians for PIN window, which displays all of the physicians that are associated with the Provider PIN that is entered on the Physicians window.

Enroll Demographics

The Enroll Demographics window is used to calculate the number of eligible candidates for vaccines according to the candidates' age groups and VFC eligibility. You can also specify how the calculations are derived by checking the appropriate boxes in the Type of data used to determine profile section. Calculations in this window are directly correlated with the percentages you enter in the Population Estimates section of the Setup-Enrollment window.

Note: If you click on the Enroll Demographics link on the VACMAN at a Glance window, you will be able to access demographic information for all of your providers. However, if you click on the Demographics button on the Providers window, you will only see only the demographics for that particular provider.

Enrollment Window

The Enrollment window displays a form for entering demographic data. The form is titled "Enrollment" and includes a "PIN" field. The data is organized into columns for age groups: "Under 1 Yr.", "1 - 6 Yrs.", "7 - 18 Yrs.", and "19+ Yrs.". The rows represent different categories of candidates, with values entered in the "Under 1 Yr." column.

	Under 1 Yr.	1 - 6 Yrs.	7 - 18 Yrs.	19+ Yrs.
Total Needing Immunizations	0	0	0	0
Enrolled in Medicaid	0	0	0	0
Uninsured	0	0	0	0
American Indian/Alaskan Native	0	0	0	0
UnderInsured (in FQHC or RHC only)	0	0	0	0
Total VFC Eligible	0	0	0	0
G317 Eligible	0	0	0	0
Other/State Eligible	0	0	0	0

Below the table, there is a section titled "Type of data used to determine profile. (Check all that apply.)" with the following options:

- ☐ A Benchmarking Data
- ☐ B Medicaid Claims Data
- ☐ C Provider Encounter Data
- ☐ D Registry Data
- ☐ E Vaccine Replacement Data
- ☐ F Doses Administered Data
- ☐ G Prior Ordering Data
- ☐ Z Other

Note: If you don't key in any information in enrollment, VACMAN will assume the provider sees no children and will not allow you to ship vaccine to this PIN.

Type of data used to determine profile

Code	Name	Description
A	Benchmarking	A process of collecting data over a set time frame (preferably three months), which are used to calculate an estimation for the same data over a larger time frame (usually a one-year period following the benchmark).
B	Medical Claims	A retrospective collection of data derived from medical claims that are used to calculate an estimation for the same data over a larger time frame (usually a one-year period following the benchmark). This data can be collected from a one-year time

Code	Name	Description
		frame, or from benchmarking any period of time.
C	Provider Encounter	A retrospective collection of the number of children who went to a specific provider, regardless of whether or not they received any immunizations. This data can be collected from a one-year time frame, or from benchmarking any period of time.
D	Registry	Registry represents the State Immunization Registry. States store information (including the number of immunization vaccines given to children) into a statewide electronic database called a Registry. Projects can use the electronic data to determine their vaccine enrollment data for the State. This data can be collected from a one-year time frame, or from benchmarking any period of time.
E	Vaccine Replacement	A retrospective collection of the number of vaccine doses that a project distributes to a provider. This data are then used to recalculate the number of doses the provider administers. This data can be collected from a one-year time frame, or from benchmarking any period of time.
F	Doses Administered	A retrospective collection of the number of vaccine doses that a provider administers regardless of the funding. This field differs from the Registry field by the medium in which the data are collected. (Doses Administered data is derived from paper-based records whereas Registry data is derived from electronic records.) This data can be collected from a one-year time frame, or from benchmarking any period of time.
G	Prior Ordering	A retrospective collection of the number of doses that a provider ordered over any period of time to determine the number of doses a project should send to that provider over a following year (without requiring the provider to order). This data can be collected from a one-year time frame, or from benchmarking any period of time.
Z	Other	A retrospective collection of any data that is derived by a method that is not listed in the Source Data section, and used to calculate estimates for the same data in a following year. This data can be collected from a one-year time frame, or from benchmarking any period of time.
